

## PART B - FEE(S) TRANSMITTAL

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**Commissioner for Patents**  
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

24024 7590 08/18/2004

CALFEE HALTER & GRISWOLD, LLP  
 800 SUPERIOR AVENUE  
 SUITE 1400  
 CLEVELAND, OH 44114

10/13/2004 FMETEK12 00000100 030172 09333783

01 FC:1501 40.00 DA 1330.00 DP

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Mary Curtin (Depositor's name)

Mary Curtin (Signature)

10/17/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/333,783	06/15/1999	RALPH PRINGLE JR.	970376	4506

TITLE OF INVENTION: SCINTILLATION-IMMUNE ADAPTIVE OPTICS RECONSTRUCTUR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	11/18/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
LUU, THANH X	2878	250-201900			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Calfee, Halter & Griswold LLP
- 2
- 3 David R. Percio

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

B.F. Goodrich Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Charlotte, NC

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☐ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-0172 (enclose an extra copy of this form).

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

(Date)

William E. Kite

10/17/2004

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PTO/SB/21 (05-03)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/333,783
Filing Date	06/15/1999
First Named Inventor	Ralph Pringle Jr.
Art Unit	2878
Examiner Name	Thanh X. Luu
Attorney Docket Number	21220/04079

Total Number of Pages in This Submission

**ENCLOSURES (Check all that apply)**

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><div>Remarks</div> | <input type="checkbox"/> After Allowance communication<br>to Group<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>Identify below):<br><b>Issue Fee Transmittal (1 pg.)</b><br><b>Check for \$1330.00</b><br><b>Return Receipt Postcard</b> |
|---|--|---|

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	_____	Customer Number	24024
Signature	<i>William E. Pitzer</i>		
Date	10/7/2004		

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Typed or printed name	Mary Curtin		
Signature	<i>Mary Curtin</i>	Date	10/7/04

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